

Trinity House Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
7 July 2025

Service provided by:
Trinity Craighall LLP

Service provider number:
SP2018013171

Service no:
CS2018368961

About the service

Trinity House Care Home is a care home for older adults, situated in a residential area of north Edinburgh, close to main bus routes and local amenities. The home is set within its own well-maintained grounds with private parking.

The home is currently registered to provide a care service to a maximum of 55 older people. The provider is Trinity Craighall LLP and is associated with other care homes across Scotland.

Accommodation is provided over three floors, with the upper levels accessed by lifts or stairs. All bedrooms have en-suite facilities and some are large enough to accommodate twin or double beds. Additional amenities include a cinema, small dining room for fine dining and celebrations, library, central area with café/bar, a hairdresser and communal lounges with dining areas on each floor.

About the inspection

This was an unannounced inspection which took place on 8 July 2025. The inspection was to follow up on a Requirement which was made on the outcome of complaint investigation which concluded in May 2025.

The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. An action plan was received in response to the complaint.

Key messages

The service has made significant improvements to ensure the requirement was met within timescales.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 23 June 2025, the provider must demonstrate that personal plans and additional documentation make proper provision for people's safe catheter care and detail how identified risks will be managed.

To do this the provider must, at a minimum:

- a) Ensure documentation and records are accurate, sufficiently detailed and reflect the care planned and provided, including how identified risks will be reduced and managed;
- b) Ensure that there are accurate records to monitor fluid intake and urinary output where an indwelling urinary catheter is in place, and record the colour of the urine or any abnormalities identified;
- c) Ensure there is a clinical daily overview of people's hydration status who have an indwelling urethral catheter in situ;
- d) Ensure that staff demonstrate the necessary skills to support people safely, are aware of their responsibility in maintaining accurate records, and follow best practice in catheter care;
- e) Demonstrate care staff are aware of the content of the care plans and how support must be provided;
- f) Demonstrate that managers are involved in monitoring and the audit of records.

This requirement was made on 16 May 2025.

Action taken on previous requirement

There has been a significant improvement made in the care and support plans of those who have an indwelling urinary catheter. This information details the care and support required from care staff and the risks areas associated with catheters. People's preferences are also included as to how they would like to be supported.

A review has taken place of how fluid intake and urine output records are monitored and the content analysed, which ensures people are drinking well to help reduce the risk of urine infections and they are hydrated. Staff are now aware of the importance of accurate record keeping.

All care staff have attended TURAS training on catheter care and also in house training has been provided. Staff felt this training was very beneficial and has improved their knowledge and skills to ensure a good standard of catheter management and care is being provided to people.

Staff are now more aware of the key risk areas and how these risks are to be monitored and managed with people who have a urinary catheter. Staff are reporting any potential abnormalities to registered nurses.

The management have included a catheter management focus at the daily meeting with senior staff, which means any concerns can be highlighted and appropriate action taken.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

1. To support people's health and wellbeing needs, the manager should ensure recordings of people's changes of position is undertaken to evidence good practice. Records should be maintained in line with people's planned care and support needs.

This area for improvement was made on 30 September 2024.

Action taken since then

This area for improvement was not assessed at this inspections and will be followed up at the next inspection.

Previous area for improvement 2

2. To promote best outcomes for people, the manager should ensure personal plans contain the necessary information about people's preferences for end-of-life care.

This area for improvement was made on 30 September 2024.

Action taken since then

This area for improvement was not assessed at this inspections and will be followed up at the next inspection.

Previous area for improvement 3

To ensure people experience high quality care, the provider should ensure that staff have regular opportunities to reflect on their practice through formal supervision with their manager. Discussions should be reflective and incorporate feedback on observations of practice, learning from training and areas for development.

This area for improvement was made on 21 July 2022.

Action taken since then

This area for improvement was not assessed at this inspections and will be followed up at the next inspection.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

To find out more

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